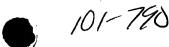
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U.S.A.



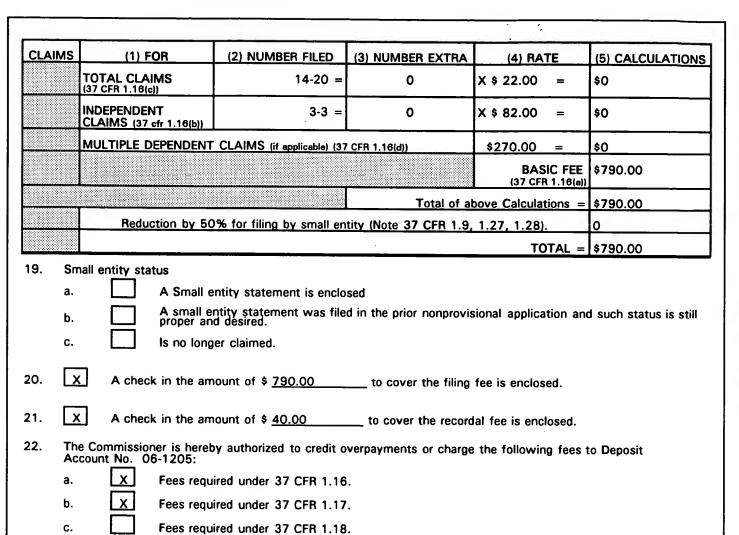
UTILITY PATENT APPLICATION TRANSMITTAL			Attorney Dod	ket No.	A	35.G2163	
				First Named Inventor or Application Identifier			
			SHUICHI OK	SHUICHI OKAMURA			
(Only for new nonprovisional applications under 37 CFR 1.53(b))			Express Mail	Express Mail Label No.			
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.			ts. ADDF	Assistant Commissioner for Patents Box Patent Application Washington, DC 20231			
Fee Transmittal Form (Submit an original, and a duplicate for fee processing)			6.	6. Microfiche Computer Program (Appendix)			
2. X Specificatio	n <i>Totel P</i>	7. Nucled (if appl	7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)				
3. X Drawings (3	35 USC 113) Total S	theets 6		а. b.	Computer Reada Paper Copy (idea	able Copy ntical to computer copy)	
4. X Oath or Dec	claration <i>Total P</i>	ages 2		c		ring identity of above copies	
a. X Newly executed (original or copy)				ACCOMPANYING APPLICATION PARTS			
b Uı	nexecuted for information	8. X	8. X Assignment Papers (cover sheet & document(s))				
c. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below] i. DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 5. Incorporation By Reference (useable if Box 4c is checked) The entire disclosure of the prior application, from which a copy			d) 9.	37 CFR 3.73(b) Statement (when there is an assignee) Power of Attorney			
			10.	10. English Translation Document (if applicable)			
			11.	11. Information Disclosure Copies of IDS Citations			
of the oath o as being part and is hereby	red 12	12. Preliminary Amendment					
			13. X	Return R (Should)	leceipt Postcard (N be specifically item	APEP 503) nized)	
			14.	Small En	· L	Statement filed in prior application us still proper and desired	
<i>λ</i> ₆			15.	Certified	Copy of Priority E n priority is claims	Pocument(s)	
·			16.	Other: _			
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: Continuation Divisional Continuation-in-part (CIP) of prior application No/							
18. CORRESPONDENCE ADDRESS							
Customer Number or Bar Code Label (Insart Customer No. or Attach bar code label here) or X Correspondence address below							
NAME FITZPATRICK, CELLA, HARPER & SCINTO							
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
NAME	Abigail F. Cousins, Esq. (Registration No. 29,292)			
SIGNATURE	Abiagail Cossions			
DATE	April 8, 1998			

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